FILED UNDER 35 U.S.C. 871

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		Assistant Examiner	Total Claims		Print Claim for O.G	
ISS	UE FEE		DRAWING			
Amount Due	Date Paid	1	Sheets Drwg.	Figs.Drwg.	Print Fig.	
	<u> 1 :</u>	Primary Examiner			<u>. </u>	
TE	RMINAL	PREPARED FOR ISSUE	Application	Examiner		
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